

CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: Farrell Date of Visit: _____

Contractor Personnel on Site:

1. Austin Bayer 2. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. tree removal / fence repair

Service Calls – Service Call Number and Description

1. CSS# PA-027-FENS 32654 - PO-0002489
2. CSS# _____
3. CSS# _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Jen Ruhlman Date: 9-2-25

Signed: Jen Ruhlman

To be signed by Facility Manager:

By signing the Certification of Work, I certify that the above-named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed.
This is **NOT** a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: Cynthia Crayle Date: 8-26-2025

Signed: Cynthia Crayle

E-Mail: _____